

**STATEMENT CLAIMING SMALL ENTITY STATUS**  
**(37 CFR 1.9(f) & 1.27(c))—SMALL BUSINESS CONCERN**

Docket Number (Optional)  
MR2577-2

Applicant, Patentee, or Identifier: John M. Mathis, et al.

Application or Patent No.: \_\_\_\_\_

Filed or Issued: \_\_\_\_\_

Title: BONE SCREW SYSTEM

I hereby state that I am

- ☐ the owner of the small business concern identified below:  
☒ an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF SMALL BUSINESS CONCERN International Medical Systems

ADDRESS OF SMALL BUSINESS CONCERN P.O. Box 4936  
Annapolis, MD 21403

I hereby state that the above identified small business concern qualifies as a small business concern as defined in 13 CFR Part 121 for purposes of paying reduced fees to the United States Patent and Trademark Office, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time, or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby state that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention described in:

- ☒ the specification filed herewith with title as listed above.  
☐ the application identified above.  
☐ the patent identified above.

If the rights held by the above identified small business concern are not exclusive, each individual, concern, or organization having rights in the invention must file separate statements as to their status as small entities, and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d), or a nonprofit organization under 37 CFR 1.9(e).

- Each person, concern, or organization having any rights in the invention is listed below:  
☒ no such person, concern, or organization exists.  
☐ each such person, concern, or organization is listed below.

Separate statements are required from each named person, concern or organization having rights to the invention stating their status as small entities. (37 CFR 1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

NAME OF PERSON SIGNING CHARLES J. PHILLIPS

TITLE OF PERSON IF OTHER THAN OWNER PRESIDENT

ADDRESS OF PERSON SIGNING 1203 Cherry Tree Lane, Annapolis, MD 21403

SIGNATURE [Signature] DATE 5/22/99

Patent and T

Work Office: U.S. DEPARTMENT OF COMMERCE

## DECLARATION FOR PATENT APPLICATION

Docket Number (Optional)

MR2577-2

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled BONE SCREW SYSTEM, the specification of which

is attached hereto unless the following box is checked:

☐ was filed on \_\_\_\_\_ as United States Application Number or PCT International Application Number \_\_\_\_\_ and was amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Priority Not Claimed

|          |           |                        |                          |
|----------|-----------|------------------------|--------------------------|
| (Number) | (Country) | (Day/Month/Year Filed) | <input type="checkbox"/> |
| (Number) | (Country) | (Day/Month/Year Filed) | <input type="checkbox"/> |

I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below.

|                      |               |
|----------------------|---------------|
| (Application Number) | (Filing Date) |
|----------------------|---------------|

|                      |               |
|----------------------|---------------|
| (Application Number) | (Filing Date) |
|----------------------|---------------|

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s), or § 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. § 112.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

|                      |               |  |
|----------------------|---------------|--|
| (Application Number) | (Filing Date) | (Status -- patented, pending, abandoned) |
|----------------------|---------------|--|

|                      |               |  |
|----------------------|---------------|--|
| (Application Number) | (Filing Date) | (Status -- patented, pending, abandoned) |
|----------------------|---------------|--|

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: MORTON J. ROSENBERG, ESQ., REG. #26,049;  
DAVID I. KLEIN, ESQ., REG. #33,253; JUN Y. LEE, ESQ., REG. #40,262

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor (given name, family name) John M. Mathis

Inventor's signature John M. Mathis 5/25/99

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Post Office Address 6270 Mt. Chestnut Rd.

Roanoke, VA 24018

Citizenship U.S.A.

Full name of second joint inventor, if any (given name, family name) Stephen M. Belkoff

Second Inventor's signature Stephen M. Belkoff 5/25/99

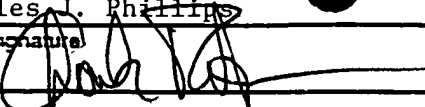
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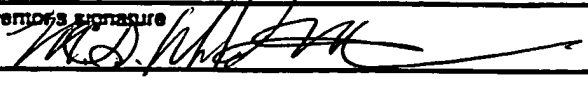
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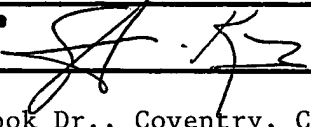
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☒ Additional Inventors are being named on separately numbered sheets attached hereto.

|                      |   |         |
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| Full name            |      |  |
| Inventor's signature |      |  |
|                      | Date |  |
| Residence            |      |  |
| Citizenship          |      |  |
| Post Office Address  |      |  |